

NOTES:

Revision: 7

- Use the least restrictive or invasive method of restraint necessary.
- Chemical restraint may be less restrictive and more appropriate than physical restraint in some situations
- Documentation of need for restraint must include:
 - Description of the circumstances/behavior which precipitated the use of restraint
 - A statement indicating that patient/significant others were informed of the reasons for the restraint and that its use was for the safety of the patient/bystanders
 - A statement that no other less restrictive measures were appropriate and/or successful
 - The time of application of the physical restraint device
 - The position in which the patient was restrained and transported
 - The type of restraint used
- Physical restraint equipment applied by EMS personnel must be padded, soft, allow for quick release, and may not interfere with necessary medical treatment.
- Spider and 9-foot straps may be used to restrain a patient in addition to the padded soft restraints.
- Restrained patients may NOT be transported in the prone position.
- EMS providers may NOT use:
 - Hard plastic ties or any restraint device which requires a key to remove
 - Backboard or scoop stretcher to "sandwich" the patient
 - Restraints that secure the patient's hands and feet behind the back ("hog-tie")
 - Restraints that interfere with assessment of the patient's airway.
- For physical restraint devices applied by law enforcement officers:
 - The restraints and position must provide sufficient slack in the device to allow the patient to straighten the abdomen and chest to take full tidal volume.
 - Restraint devices may not interfere with patient care.
 - An officer must be present with the patient AT ALL TIMES at the scene as well as in the patient compartment of the transport vehicle during transport
- Side effects of midazolam may include respiratory depression, apnea, and hypotension.